

## OFFICIAL CLAIM FOR TAX SALE EXCESS FUNDS

Complete all fields entirely. Do not alter this form in any way. **Incomplete, non-notarized, and/or altered forms will not be accepted.**

You must attach all required supporting documentation, including a copy of your valid driver's license or other valid U.S. government issued identification or foreign passport. Claims that are not accompanied by this documentation will not be accepted.

**You are not required to pay, or to be represented by, a third party in order to make a claim. The Tax Commissioner's Office can help you with this claim.** Claims from third parties, other than an attorney who has been retained by an entitled party for purposes of handling this claim, are not accepted. Attorneys need to provide their Georgia bar number as verification.

STATE OF GEORGIA  
COUNTY OF HALL

Affidavit of \_\_\_\_\_  
Name of Claimant Phone Number

\_\_\_\_\_  
Legal Name of Entity with Lien Holder Interest, if applicable

\_\_\_\_\_  
Street Address (Required)

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Parcel Identification Number/Map Code Tax Sale Date

\_\_\_\_\_  
Property Address

\$ \_\_\_\_\_  
Amount of Claim

\_\_\_\_\_  
Reason you are entitled to receive excess funds (attach supporting documentation)

The above claimant acknowledges the following under oath by signing below:

1. I am the recorded title holder and owner of the property, or a recorded owner of a security interest in the property, or a party with an equity interest in the property that was on record at the time of the tax sale. O.C.G.A. § 48-4-5
2. I have attached to this claim form a copy of my valid U. S. government identification or foreign passport.
3. I affirm that there are no outstanding liens, mortgages, and deeds to secure debt, encumbrances, or other claims or entitlements of any kind whatsoever against the property, senior to or of greater legal priority than my right to receive excess funds.
4. In exchange for the release of excess funds generated by this tax sale, the undersigned does hereby agree to hold harmless the Hall County Tax Commissioner, the Hall County Board of Commissioners, the Hall County Sheriff and all of the Sheriff's employees, including Ex-Officio Sheriffs, all Hall County Officers, Officials and employees, their agents, representatives, successors, and assigns, from any and all claims, demands, obligations, actions, causes of actions, rights, damages, costs, attorney's fees, expenses and compensation of any nature whatsoever, which may arise from the distribution of the referenced excess funds.
5. There are no lawsuits, garnishments, bankruptcies or other judicial or quasi-judicial proceedings pending against me that might affect my claim for excess funds.
6. The Hall County Tax Commissioner has the right to set off and may first apply any excess funds against any and all outstanding obligations of the claimant which are past due, or due and payable to the Hall County Tax Commissioner.
7. I agree to remit to the Hall County Tax Commissioner the total amount of excess funds disbursed to me in the event entitlement to the excess funds is successfully challenged.
8. I further agree that if the potential for competing claims exists for the excess funds, the Tax Commissioner has the right to interplead the excess funds into Hall County Superior Court for a determination as to who is entitled to receive them pursuant to O.C.G.A. § 48-4-5.
9. This affidavit is a sworn statement and false swearing is punishable as a felony under the laws of the State of Georgia, O.C.G.A. § 48-5-444

This \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

Sworn to and subscribed before me this

\_\_\_\_\_  
Claimant's Printed Name

\_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
Claimant's Signature

\_\_\_\_\_  
Notary Public  
(Notary Seal)

## OPTIONS FOR SUBMITTING THIS FORM

1. Drive up to the green Tax Commissioner drop-box located directly across from the front doors of the Hall County Government Center located at 2875 Browns Bridge Road, Gainesville, GA 30504.
2. Drop with the Hall County Tax Commissioner Information Desk inside the office.
3. Mail to:

Hall County Tax Commissioner  
Excess Funds  
P.O. Box 1579  
Gainesville, GA 30503

4. If sent by FedEx or UPS:

Hall County Government Center  
Tax Commissioner-Excess Funds  
2875 Browns Bridge Road  
Gainesville, GA 30504